

THE AREA BOARD OF ZONING APPEALS
OF TIPPECANOE COUNTY

SPECIAL EXCEPTION BALLOT
Report of Findings of Fact

DATE: _____

CASE NO. BZA - _____

PETITIONER'S NAME: _____

ANY FINDING FOLLOWED BY AN ASTERISK (*) MUST RESULT IN DENIAL OF THE REQUEST.

1.	Section 3.1 of the Unified Zoning Ordinance _____ DOES _____ DOES NOT* authorize the special exception for this use in this zoning district.
2.	The requirements and development standards for the requested use as prescribed by the Unified Zoning Ordinance _____ WILL _____ WILL NOT* be met. Reasons: _____
3.	Granting the special exception _____ WILL* _____ WILL NOT subvert the general purposes served by the Ordinance. Reasons: _____
4.	Granting the special exception will or will not materially and permanently injure other property or uses in the same district and vicinity because of: a. traffic generation: _____ WILL* _____ WILL NOT Reasons: _____ b. placement of outdoor lighting: _____ WILL* _____ WILL NOT Reasons: _____ c. noise production: _____ WILL* _____ WILL NOT Reasons: _____ d. hours of operation: _____ WILL* _____ WILL NOT Reasons: _____

VOTE TO GRANT:

It is therefore my decision, based on the above findings, that this special exception request be granted, subject to any conditions and/or commitments stated in the minutes of the Board, and incorporated herein and made a part of this decision.

_____ ABZA Member

VOTE TO DENY:

It is therefore my decision, based on the above findings, that this special exception request be denied.

_____ ABZA Member